



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
 DIVISION OF SPECIAL EDUCATION, PO BOX 480, JEFFERSON CITY, MO 65102
 FUNDS MANAGEMENT SECTION
SPECIAL EDUCATION COOPERATIVE COMMITMENT FORM

☐ **Year 1** ☐ **Year 2** ☐ **Year 3**

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| MEMBER DISTRICT NAME (use for designated fiscal agent) | COUNTY/DISTRICT CODE |
| SIGNATURE OF SUPERINTENDENT | DATE |
| MEMBER DISTRICT NAME | COUNTY/DISTRICT CODE |
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❖ The department recognizes that in Year 1, application member districts are only making commitment for planning the cooperative.